

Romanian Coalition for Gender Equality's submission to the 4th Universal Periodic Review

We would like to present our report on some of the themes and issues that are affecting women's lives: education, health, discrimination, with a special focus on Roma women. The submission is structured according to the thematic list of recommendations for Romania, but should not be regarded as exhaustive. Different issues related to LGBTQI, children, violence against women, constitutional and legal framework, are not covered by this current report. Where the main theme and recommendations were similar, we have provided feedback for more than one recommendation.

Theme: F1 Women

114.146 Further accelerate its efforts to promote and protect the rights of women (Mongolia);
Source of position: A/HRC/38/6/Add.1

Theme: F12 Discrimination against women

114.44 Harmonize gender equality for guaranteeing equal rights (Turkmenistan);
Source of position: A/HRC/38/6/Add.1 - Para. 7

Status: Partially implemented

1. Romania ranks poorly in international assessments of women's rights. The World Economic Forum Global Gender Gap Report 2022¹ puts Romania on the worst ranking in Europe, together with Greece and Cyprus. The overall gender gap score is placing Romania 90th out of 146 countries. The areas that need improvements are economic participation of women (rank 63) and political empowerment (rank 122). The latter registers the most severe gap, with women being very discriminated against in political participation, which in turn generates a low representation for women's specific needs in public policies and budgeting.
2. The EIGE report for 2020² places Romania on the top 3 worst rankings in Europe, together with Hungary and Greece, with concerns regarding the areas of lack of power

¹ Global Gender Gap Index 2022, World Economic Forum, Romania profile, pg 300:
https://www3.weforum.org/docs/WEF_GGGR_2022.pdf

² <https://eige.europa.eu/publications/gender-equality-index-2020-romania#downloads-wrapper>

(political, economical, social) and lack of time: women are doing care activities to a greater extent than men.

Achievements:

3. Any progress in the area of gender equality is very slow. EIGE identified that Romania's ranking has remained the same since 2010 and even dropped by one place since 2017.

Remaining concerns:

4. Women's political representation remains of the most urgent concerns. Although Law 202/2002 regarding equal chances between men and women is stating that political parties need to ensure a fair representation of women in electoral lists and to implement positive actions, Romanian political parties are ignorant about this matter. A study by FES Romania³ is showing the lack of gender awareness, small percentages of women in executive positions, small chances of being granted eligible positions, a highly misogynistic party culture, patriarchal gender roles and stereotypes. The Coalition for Gender Equality has made an official complaint⁴ to the Anti-Discrimination Institution that political parties are not respecting legal provisions regarding equal chances for women on the electoral process, for direct and indirect discrimination against women: not being present on electoral lists and not being voted into political power, women remain an under-represented social category in Romania.
5. Economic gender inequalities in Romania are the biggest in Europe, with no improvements in sight. The percentage of women active on the labor market was 42.6% in 2020, one of the lowest in Europe, caused by women being the main providers of care work and domestic work. Women are not only underrepresented in the salaried population (43.7% in 2020, less than ten years ago), but also as self-employed population or entrepreneurs. One category clearly dominated by women is that of unpaid family workers, whose situation is by far the most precarious⁵. Also, women occupy feminized branches such as hospitality, social care, education, which are paid less than others where men dominate in numbers. Although Romania has good economic growth, this is not transferred to women, which remain economically vulnerable and with a high risk of poverty.

Further recommendations:

6. Include mandatory gender quotas in electoral legislation and find ways to encourage political parties to adopt quotas (this can be a criterion for receiving state funding, for instance)

³ Political representation of Romanian women, 2021, Friedrich Ebert Stiftung: <https://library.fes.de/pdf-files/bueros/bukarest/18818.pdf?fbclid=IwAR1HO3dlgB5ti4GerKdi7IjLWKccnonEYvyC9ypAk33ZIMSfmoRYeFDm4KI>

⁴ <https://ongen.ro/2022/07/24/petitie-la-cncd-subreprezentarea-femeilor-pe-listele-electorale-constituie-discriminare/>

⁵ Data from the study: Economical Gender Inequalities in Romania, 2021, Friedrich Ebert Stiftung, https://library.fes.de/pdf-files/bueros/bukarest/18613.pdf?fbclid=IwAR1owf55JROwYNrNBOC_qLm66Got1L3oWfTEZ17LaWbBNpk5KB6v5TekrI

7. Revise legal frame and include more specific details regarding the implementation of equal chances in the electoral process and sanctions if not done.
8. More systematized data collection on women's political representation, including at the level of the Electoral Authority which doesn't currently have segregated data.
9. Awareness campaigns regarding the importance of political representation for women, encouraging women's active citizenship and explaining notions like quotas or glass ceiling.
10. Public policies aimed at reducing labor market disparities between men and women, and establishing equal salary scales for economic branches, either feminized or masculinized.
11. Investments in care facilities (cheches, kindergartens, after-school) so that women can fully participate in the labor market. Multiply the social assistance facilities also for the elderly and the disabled.

Theme: F1 Women

114.148 Take measures to promote the rights of women, in particular by addressing the recent resurgence of discourse containing stereotypes concerning women's rights to reproductive and sexual health (Belgium);

Source of position: A/HRC/38/6/Add.1 - Para. 8

Status: not implemented

12. In theory, the right to abortion until week 14 of pregnancy is guaranteed by law and all public hospitals should ensure equal access to all women. In practice, Romanian women are having difficulties in accessing this right as hospitals refuse to perform the procedure or don't have it listed in their medical services. Women are forced to resort to private clinics, which are not covering the entire country and have higher costs. In some cases, doctors from the public hospitals that are also working in private clinics are referring women to the private clinics (in 2020, it is believed that 1 in 2 abortions have been performed in the private sector)⁶. In 2021, no on-demand abortion has been performed in public hospitals from 11 counties in Romania, according to a journalistic investigation mentioning official data from the National Institute of Statistics⁷. Access to abortion is becoming more and more difficult each year, women need to travel to other regions or to pay huge amounts in the private sector.

Achievements:

13. Formal political discourse is still pro-choice and there are no law projects that want to change the legality of the medical act.

⁶ Journalistic investigations are discovering the links between the public and the private sector regarding access to abortion: <https://jurnaluldecretului.ro/ce-treaba-aveti-dumneavoastra-cu-privatul-meu/>

⁷ <https://www.libertatea.ro/stiri/in-11-judete-din-romania-nu-s-a-facut-niciun-avort-la-cerere-in-2021-in-spitalele-publice-exista-femei-care-sunt-nevoite-sa-mearga-in-alt-judet-4195786>

Remaining concerns:

14. Abortions are not free and thus remain a financial burden for vulnerable women, especially if performed in private clinics where the cost is 4 times higher. Contraception is not free, there are very few family planning clinics.
15. During the pandemic restrictions, abortions have been removed from the list of emergency medical acts and implied they can be postponed, which was an act of severe restrictions of women's rights. The Coalition of Gender Equality sent an open letter to authorities in October 2021 demanding that hospitals should continue to perform this medical act⁸. One month later, the institutional answer approved our request⁹ but we are not sure that hospitals were properly informed or monitored to stand by it.
16. State hospitals are refusing to perform abortions. Research conducted by Centrul Filia¹⁰ in 2021 on 171 public hospitals has shown that:
 - 69 hospitals do not perform this medical act
 - out of 802 gynecologists from these hospitals, only 275 perform abortions
 - 51 hospitals have invoked religious motivation for doctors refusing to perform abortions
17. A journalistic investigation from 2021¹¹ has shown that 90% of state hospitals don't have internal procedures or administrative decisions regarding the medical act of abortions. The decision is left to the choice of the doctors whether to perform it or not. There are cases of doctors forcing women to talk to priests as a condition to perform the procedure.
18. In this restrictive context, there are cases of women performing empirical non-medical abortions that are putting their health and life in danger. There is no official documentation on this matter.

Further recommendations:

19. Establish a protocol for hospital managers that includes the necessary steps to ensure unrestricted access to on-demand abortion throughout the year, in all counties of the country.
20. Introduce the provision of on-demand abortion services in the accreditation procedure of hospitals with obstetrics and gynecology departments
21. Adopt, implement and monitor the Reproductive Health Strategy 2021-2026;
22. Establish, at the national level, a protocol on abortions (on request, medicated, and therapeutic) containing clear specifications on the situations in which a patient can be refused, on the procedure itself, the rights and obligations of the parties, etc.
23. To facilitate free pregnancy termination if the pregnancy is the result of rape or incest.
24. Introduce the abortion-on-request between the procedures covered by the medical liability insurance (malpractice insurance)

⁸ <https://ongen.ro/2021/10/27/douazeci-de-ong-uri-solicita-respectarea-dreptului-femeilor-la-avort-in-unitatile-medicale-de-stat/>

⁹ <https://ongen.ro/2021/11/22/dsu-avortul-este-o-interventie-medicala-care-nu-suporta-amanare/>

¹⁰ <https://centrulfilia.ro/new/wp-content/uploads/2021/10/Abortion-report.pdf>

¹¹ <https://jurnaluldecretului.ro/la-noi-e-o-cutuma/>

25. To not impose the introduction of mandatory pre-abortion counseling, which can lead to the conveyance of erroneous information in public medical units, which discourages women from turning to an abortion on request without being properly and impartially informed.
26. To provide on the avort.ro platform correct, scientifically validated, and impartial information about on-demand, medicated, and therapeutic abortions, but also an informational telephone line for women who want to find out more about this medical service.

Theme: F12 Discrimination against women

114.43 Continue efforts to ensure gender equality and promote women's rights (Tunisia);

Source of position: A/HRC/38/6/Add.1

Status: partially implemented

Achievements:

27. The National Agency for Equality of Opportunities between Women and Men (NAEO) is implementing gender equality projects with financing from international donors.

Remaining concerns:

28. NAEO programs are not receiving state financing, so no sustainability is ensured for any of their current projects.
29. The Ministry of Education is not providing gender equality and anti-discrimination information in schools.
30. Violence against women and sexual violence is a widespread phenomenon and should never be justified by culture, education, religion, social or economic status. But at the same time our experiences show that violence affects differently women and girls from ethnic groups, LGBT community, disability or of a social/economic status. There is a high prevalence of intersectional violence against Roma women and girls caused both

by patriarchal rooted systems and institutional racism¹².

31. At community level, violence against women is a normalized phenomenon. In many cases, Roma women have appealed to the authorities, but they did nothing. The pressure from the community and family to stay in abusive relationships and the traditionalistic norms from the society that domestic violence is a private problem are other challenges that we face in our work.
32. The lack of authorities' interest in ensuring women's access to services and justice in cases of domestic violence. The lack of local services at local level (such as shelters, police officers prepared to act and free access to justice).

Further recommendations:

33. The state should increase women's access to justice by providing compensations and remedies on multiple grounds considering their multiple vulnerabilities.
34. The state should increase awareness within the justice system towards human rights, multiple and intersectional discrimination against Roma women and other groups through trainings for lawyers, judges etc.
35. The state should establish advisory centers within courts to increase access to justice for Roma women and other vulnerable groups
36. The state should make human rights courses in University laws as mandatory so that lawyers/prosecutors/judges/doctors/ teachers would know what gender discrimination and multiple and intersectional discrimination are.
37. Since discrimination on more than one ground has a stronger effect of exclusion/vulnerability than discrimination based on one ground it is highly important that the national legislation should develop instruments, juridical practice and acknowledgments of multiple/intersectional discrimination as an aggravated form which can also bring higher sanctions which currently are not strong enough to combat the phenomenon. Moreover, even if the multiple discrimination is defined by Romanian legislation in Law 202/2002 with subsequent changes, the legislation does not offer any regulations/methodologies towards the phenomenon and therefore it is not used by lawyers and practitioners.
38. Each educational institutions, especially public schools and universities, should have interventions protocols for awareness, prevention and intervention in cases of sexual

¹² One such example is the case of Florica Moldovan (2019), a Roma woman from Zalău with multiple vulnerabilities (native Romani speaker, single mother, poor, illiterate, homeless), beaten by a bus driver (former policeman), then cursed, discriminated against and humiliated by the 112 operator proves once again that acts of violence in public space against Roma women are motivated by racism, sexism and classism. Even worse is that the justice system in Romania is elitist and inaccessible to Roma women and faithfully mirrors the discrimination and prejudices against the Roma minority existing at the Romanian society level. After 3 years, the case reached a first sentence: Florica Moldovan was found guilty of disturbing the peace and public order and was sentenced to pay a fine of 1,800 lei, converted into 180 days in prison in case she won't pay. In addition, Florica must also pay 800 lei as court fee, but the aggressor of the Roma woman escaped only with a suspension, and the facts of discrimination do not exist, they are "mere speculations, not based on factual elements" - this is the motivation of the magistrates. It should be noted that this case ended up in court thanks to some individuals and non-governmental organizations. Usually, women like Florica Moldovan do not have access to justice, and such cases do not end up in court.

harassment, revenge porn and other forms of gender based violence. The Ministry of Education and the Universities should develop and frame regulation and develop teachers training in this regard.

39. The state should ratify the International Labor Organization's Convention no. 190 on the Elimination of Violence and Harassment in the World of Work and implement ILO's accompanying Recommendation no. 206.
40. The state should develop a unified database on all forms of violence against women which would also include a custom-made methodology of data collection. Also ensure its implementation in practice by organizing training sessions on the methodology in institutions that provide protection from violence.
41. The state should provide continuous support for the activities of NGOs in providing assistance and support to women victims of violence, notably through regular planning and allocation of funds from public budgets at the entity, priority intervention programs, activities to provide free legal and psychosocial assistance to women victims of violence.
42. The state should work with NGOs to provide trainings on specific issues related to Roma women (how to address, interact, support when illiteracy occurs and women can't read/write their declarations etc)

Theme: F12 Discrimination against women

114.200 Adopt a national strategy to raise awareness among the Romanian population about traditional harmful practices against women and discriminatory gender stereotypes (Uruguay);

Source of position: A/HRC/38/6/Add.1 - Para. 24

Status: not implemented

Achievements: none

Remaining concerns:

43. The National Strategy 2021-2027 for the promotion of equal opportunities and treatment between women and men and the prevention and fighting against domestic violence was published for public consultation between 09.03.2021 and 19.04.2021. After more than 1.5 years, the Strategy has not yet been approved by the Government. From the information we have, the Strategy has been blocked at the Ministry of Investments and European Projects.

Further recommendations:

44. Urgent adoption of the Strategy for the promotion of equal opportunities and treatment between women and men and its operational implementation plan in order to have a clear schedule, concerned institutions and budgeting for awareness campaigns and educational projects;
45. Improve/update current occupational standards for expert/technician in equal opportunities to be in line with the legislation, as well as with existing European recommendations, as public institutions and private companies with more than 50 employees can hire experts in equal opportunities, as stated by Law 202/2002, which regulates equal opportunities and treatment between women and men;
46. Update the mandatory primary and secondary educational curricula, school learning books, teachers training programs and guidelines in order to promote and support gender equality. Exclude the text books and educational approaches that promote discriminatory gender stereotypes.
47. Adopt and implement the National Strategy on parental education. The Ministry of Education launched a draft in April 2022 for public consultation¹³. It mentions gender equality as a general principle, and needs further developments.

Theme: E43 Access to sexual and reproductive health and services

114.143 Implement and ensure equal access to mandatory gender equality and age-appropriate comprehensive sexuality education within the formal education system (Australia);
Source of position: A/HRC/38/6/Add.1 - Para. 16

Theme: E43 Access to sexual and reproductive health and services

114.144 Introduce education for sexual and reproductive health in the core curriculum for secondary education, including by setting out a concrete timeline of implementation of such a measure (Slovenia);
Source of position: A/HRC/38/6/Add.1 - Para. 16

Theme: E43 Access to sexual and reproductive health and services

114.145 Take steps to introduce comprehensive and evidence-based sexuality education in the core curriculum for secondary education, as well as to ensure sufficient teacher training on sexuality education (Finland);
Source of position: A/HRC/38/6/Add.1 - Para. 16

Status: not implemented

48. Comprehensive and evidence-based sexuality education is implemented only on paper, not in schools. Sexuality education is not a mandatory subject in schools in Romania. Health Education was introduced in the national curriculum for public education in 2004 as an optional discipline and addresses only a few topics related to sexuality education.

¹³

https://www.edu.ro/sites/default/files/Strategie_Nationala_Educatie_Parentala_document_de_lucru_ME_2022.pdf

Issues such as sexual orientation, gender norms, gender identity, prevention of unwanted pregnancies and safe and legal abortion are not discussed. The number of pupils enrolled in Health Education decreased sharply, from 12% in 2011-2012 to below 6% in the 2014-2017¹⁴. Schools and parents are not encouraged by the Ministries of Education, Health or the Ministry of Youth to access this form of education, despite the fact that the National Youth Policy Strategy 2015-2020 sees the high adolescent pregnancy and abortion rates as “an alarm signal” and “a special challenge”. Teachers have no access to specific training essential in obtaining skills for teaching issues related to sexuality education and are particularly reluctant to discuss issues related to puberty and sexuality. The information pupils receive is not rights-based nor age-appropriate.

Achievements:

49. No achievements have been made. No form of sexuality education is conducted in schools formally, but there are cases when school principals/teachers allow specialized NGO volunteers to hold classes sporadically. A very good alternative practice has been established by the SEX vs The STORK Association by means of a YouTube educational channel that has been striving to supply sex education-related teaching material since 2013¹⁵.

Remaining concerns:

50. The endemic lack of comprehensive, evidence-based sexuality education is one of the contributors to the high rates of teenage pregnancies in Romania. According to data published by Eurostat, Romania recorded the highest shares of births of first children to teenage mothers (with 12.3% of total births of first children in 2015¹⁶). Despite the Final Observations of 13 July 2017 of the Committee on the Rights of Child, in which it urged Romania to extend the scope of the National Program on Sexual and Reproductive Health (2013-2017) to provide comprehensive, age-appropriate health and sexuality education (CRC / C / ROU / CO / 5, para. 36 (d)), the situation in Romania has not improved.
51. On the contrary, the Romanian Parliament voted in 2022 for replacing sexuality education despite the purpose provided by law (art. 46 paragraph (3) letter i) of Law no. 272/2004 on the protection and promotion of children's rights¹⁷, regarding the prevention of "sexually transmitted diseases and the pregnancy of minors"). At the same time, the elimination of the phrase "at least once a semester" of sexuality education from the law affects the interests and rights of pupils to regularly receive relevant information with an impact on their overall health, including sexual and reproductive health and rights. The

¹⁴ Report available on the site of the Romanian Presidency, https://www.presidency.ro/files/userfiles/Raport_educatie_pentru_sanatate_19_ian_2016.pdf

¹⁵ <https://www.youtube.com/c/SEXULvsBARZA>

¹⁶ <https://ec.europa.eu/eurostat/web/products-eurostat-news/-/DDN-20170808-1>

¹⁷ <https://childhub.org/en/child-protection-online-library/law-no-2722004-protection-and-promotion-rights-child?language=ro>

current non-mandatory discipline Health Education contains a reduced informational segment on sexuality education. On June 21, 2022, the Parliament resumed the debates on the terminology to be used, i.e.: 'sanitary education' or 'life education' in the Child protection act, rather than what has already been sanctioned since 2004, namely 'health education' and finally voted on the amendment, specifying that it should start in 8th grade, pending on written parental consent, without taking into account that the subject "Biology" taught in 7th grade has content related to conception, contraception and sexually transmitted infections.

Further recommendations:

52. Increase access to / mandate teaching of the Health Education discipline for all pupils and offer comprehensive, rights- and evidence-based and age-appropriate sexuality education and information in schools.
53. Develop behavior change communication and awareness campaigns on health risks targeting adolescents and secure their access to youth-friendly Family Planning services.

Theme: G1 Members of minorities

114.55 Adopt specific legislative and policy measures, with a gender focus, to combat discrimination against the Roma in law and in practice, which include positive measures to guarantee inclusion in the areas of health, education, housing and employment, particularly in rural areas (Honduras);

Source of position: A/HRC/38/6/Add.1 - Para. 9

Status: not implemented

Remaining concerns:

54. Despite the fact that Romania has signed European treaties and conventions on antidiscrimination, gender equality and has a National Strategy for Roma inclusion and a national strategy for gender equality, Roma women are still missing from both strategies. In April 2022, the National Agency for Equal Opportunities for Women and Men (NAEO) and the National Agency for Roma (ANR) established an inter-institutional partnership, the aim of which is to combat prejudices and stereotypes against Roma and those related to gender, with an emphasis on promoting the European values among local communities, public administration officials, as well as among the general population.
55. At the same time, within the Romanian Government Strategy for the Inclusion of Romanian Citizens Belonging to the Roma Minority 2021-2027 elaborated by the National Agency for Roma, Roma women continue to be invisible, not being mentioned in the Strategy's action directions, nor in the measures or the proposed indicators. Although some of the problems faced by Roma girls and women are mentioned (insufficient education, lack of access to healthcare, low participation in the labor market), the Strategy does not contain an explicit and assumed gender perspective and

does not have an intersectional approach to the problems and the needs of the Roma women in any field of action. From the perspective of the ANR, gender violence can at most be a health problem, denying and ignoring the realities and experiences of multiple and intersectional discrimination that Roma girls and women go through, the lack of access to social services for protection and prevention of violence, lack of access to justice, lack of access to reproductive health services.

56. Roma women continue to represent one of the most vulnerable categories, facing multiple and intersectional discrimination. During the Covid-19 pandemic, violence increased even more, and the home became an unsafe space. Roma women in the communities were disproportionately affected, as Roma are living in overcrowded housing in a higher percentage compared to the majority population.
57. Roma women also suffer inequalities due to the fact that the police officers or other types of workers do not intervene, culturally motivating the phenomenon of violence. Many times, instead of enforcing the law, the police assume the role of mediators of conflicts, and social workers show discriminatory and abusive behavior towards Roma girls and women. The more vulnerable you are as a Roma woman, the more the number of systems of oppression against you increases.
58. Qualitative research recently carried out by Carmen Gheorghe and Cristina Mocanu¹⁸ demonstrates that there is a close connection between living in a segregated, ghettoized, traditional or informal community as Roma women and the lack of access to infrastructure (paved roads, transport, street lights, sewage, drinking water, electricity, etc.). Also, poor housing is associated with low access of Roma women to health services or other types of essential services. For example, a Roma woman who lives in a marginalized community or a poor or segregated neighborhood is very likely to be treated with less respect when she goes to the doctor. Besides, poor housing is closely connected with low level of education, high levels of discrimination, racism and humiliating treatment, low access to the labor market. If you add elements such as dark skin, speaking the Romani language or belonging to a sexual minority, all these vulnerabilities deepen.

Further recommendations:

59. Assessment of current national and local strategies and include Roma women and the gender perspective.

Theme: E41 Right to health - General

¹⁸ Carmen Gheorghe, Cristina Mocanu, *Challenging intersectionality: Roma women's voices and experiences. Experiences of discrimination of Roma women in housing, education, health and employment - Comparative research on multiple discrimination in Finland, Italy and Romania*, București, Martie 2021 (carried out within "Intersect Voices in Europe – combating discrimination against Roma women" project, funded by the European Union's Fundamental Rights, Equality and Citizenship Programme (2014-2020)).

114.133 Introduce a national HIV prevention strategy and work with civil society for its implementation (Australia);
Source of position: A/HRC/38/6/Add.1

Theme: E41 Right to health - General

114.134 Consider the adoption of a national strategy on HIV/AIDS (Israel);
Source of position: A/HRC/38/6/Add.1

Theme: E41 Right to health - General

114.135 Accelerate the adoption and budgeting of the national HIV/AIDS strategy 2018–2020 and the national strategy on sexual and reproductive health and rights (Germany);
Source of position: A/HRC/38/6/Add.1

Status: not implemented

60. The Romanian government has had plans in place to adopt national strategy on HIV/AIDS and national strategy on sexual and reproductive health for more than 15 years. Concerning HIV/AIDS, the Ministry of Health does not comply with its legal obligations to adopt the HIV/AIDS Strategy, allocate financial resources for prevention programs while HIV incidence is growing abruptly among key populations such as men having sex with men and drug users. While the HIV epidemic in Romania is stable with an estimated <1,000 new HIV infections per year and a resulting HIV incidence of 0.10 (0.07-0.08) and 0.1 HIV prevalence among adults aged 15-49 years, the impact upon key populations such as MSM and IDUs is much higher. The current National HIV Program is primarily focused on ARV treatment and does not provide resources for HIV/AIDS prevention and research. Additionally, the budget available is insufficient for ensuring HIV monitoring, while cases of discrimination based on HIV, sexual orientation and gender identity in healthcare services remain unaddressed and unpunished.

Achievements:

61. The Health Ministry has published a National Health Strategy 2022-2030 document on its website¹⁹ uploaded only as a PDF document, not clear of its current status, whether in public consultation or just as a draft, as there isn't any official announcement about this document on the Ministry website. We are concerned about the lack of institutional transparency. The document mentions the extension and improvement of services regarding reproductive health, maternal health, prevention programs, reducing the incidence of teenage pregnancies, and providing free contraception.
62. In June 2022, The Health Ministry has put under public consultation the National HIV/AIDS Strategy²⁰. No further news on its adoption, budgeting and implementation.

¹⁹ https://www.ms.ro/wp-content/uploads/2022/04/SNS_consultare-public%C4%83.pdf

²⁰ <https://www.ms.ro/2022/06/24/proiectul-de-hotarare-a-guvernului-privind-aprobarea-strategiei-nationale-pentru-supravegherea-controlul-si-prevenirea-cazurilor-de-infectie-cu-hiv-sida-in-perioada-2022-2030/>

Remaining concerns:

63. The government has not adopted any Sexual and Reproductive Health and Rights Strategy. The strategy developed for 2012-2015 remained a draft, as it had neither been officially adopted, nor financed. The Ministry of Health attempted consultations with the specialized NGOs for the development of the current SRHR strategy, but the process failed to be completed.
64. The National AIDS Commission, an inter-ministerial body that is coordinating the state intervention in this field at all levels and guarantees the application of the international obligations undertaken by Romania, was removed by the Government in 2021. By Ordinance 18/2021²¹, the Government of Romania repealed Article 4 of the HIV/AIDS Law no.584/2002 which provided for the establishment of the National HIV/AIDS Commission, but all other provisions and references regarding the role and mandate of the commission (such as the adoption and coordination of the national HIV strategy, monitoring compliance with the legal obligations of health units in this particular public health area, the adoption of the therapeutical guide, etc.) remained in force in the absence of the interministerial and inter-sectoral institution to apply and monitor them. Such a measure is going against the international recommendations addressed in the third UPR cycle by member states such as Australia (Recommendation no. 114.113, A/HRC/38/6 (UPR 2018), Germany (Recommendation no.114.135, A/HRC/38/6 (UPR 2018), Israel (Recommendation no.114.134, A/HRC/38/6 (UPR 2018), recommendations accepted by the Romanian Government.
65. The perpetuation of the criminalization of the transmission of this virus induces the idea that people infected with HIV represent a distinct danger in society that must be combated by special measures: this legal type of discrimination in comparison with other types of viral transmissions should not be tolerated by the Romanian state. Also, the increase of criminal penalties proposed in Parliament in 2022²² for possession of drugs for personal consumption has no justification and contradicts the recommendations of specialists and various international bodies such as the Global Commission on Drug Policy²³.
66. The Government of Romania has not taken steps to prevent HIV/AIDS and other sexually transmitted diseases. Measures for prevention focused on key populations and the general public were not organized or financially supported at national scale. The state is not applying a human rights-based approach to drug users failing to respect their basic right to health, taking steps in opposite direction to the relevant international recommendations made by various UN agencies. The Parliament is proposing in 2022 an increase of penalties for all drug-related offenses²⁴, a legal initiative that has already passed by the Senate- the first chamber of the Chamber of Parliament notified, while civil society calls for comprehensive drug prevention and education, drug treatment, and harm reduction financed at national, regional and local scale.

²¹ <https://legislatie.just.ro/Public/DetaliuDocumentAfis/245932>

²² http://www.cdep.ro/pls/proiecte/upl_pck2015.proiect?idp=19908

²³ <https://www.globalcommissionondrugs.org/reports/time-to-end-prohibition>

²⁴ <https://senat.ro/legis/PDF/2022/22L297FS.PDF>

Further recommendations:

67. Clear timeline for the adoption of the National Health strategy and National HIV/AIDS strategy: transparency, proper budgeting, institutional commitment, plan for implementation. Adopt and finance its operational national plan with a focus on prevention among vulnerable groups and key populations at increased risk of HIV and uninterrupted treatment for people infected with HIV.
68. Adopt a national strategy on sexual and reproductive health and rights. Adopt and finance its operational national plan with a focus on the prevention of teenage pregnancies, sexual education in schools, free contraception.
69. Operationalize legislation that allow ministries and state agencies to subcontract NGOs delivering social and medical services targeting populations vulnerable to HIV.
70. Support and finance interventions and policies designed to serve people who use drugs reflecting their specific individual and community needs.
71. Deprioritize HIV and drug use criminalization based on scientific and medical data and public health goals.

Theme: A12 Acceptance of international norms

114.21 Accede to the International Convention for the Protection of All Persons from Enforced Disappearance and to the Optional Protocols to which it is committed, notably the Optional Protocol to the Convention on the Rights of Persons with Disabilities and the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights (Sierra Leone);
Source of position: A/HRC/38/6/Add.1 - Para. 3

Status: not implemented

72. Although Romania ratified almost all of the key UN human rights treaties, it has generally failed to ratify the associated optional protocols that allow for victims to access the individual complaints procedures and pursue justice and the remedy for the human rights suffered before the relevant UN treaty bodies that monitor the implementation of the treaties.

Recommendations:

73. The State should initiate the ratification process for all optional protocols of all ratified UN human rights treaties, prioritizing the following:
 - Optional Protocol to the Convention on the Rights of the Child on a communications procedure
 - Optional Protocol to the Convention on the Rights of Persons with Disabilities
 - Optional Protocol to the International Covenant on Economic, Social and Cultural Rights

